

1# 0516 145

21 CT - 12702

1# 1041

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

1. Arrest
2. N.T.A.
3. Request for Warrant
4. Request for Capias

Juvenile ☒ N

OBT Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-21091481	
Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type <input checked="" type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No		Multiple Clearance Indicator 01			
Location of Arrest (Including Name of Business) Davis Rd and Melaleuca Ln Lake Worth FL 33461				Location of Offense (Business Name, Address) Davis Rd and Melaleuca Ln Lake Worth, FL 33461			
Date of Arrest 06/06/2021		Time of Arrest 0630		Booking Date		Booking Time	
Jail Date		Jail Time		Location of Vehicle Stevens Towing			
Name (Last, First, Middle) Garcia Tatiana Mariel				Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White / - American Indian		Sex W		Date of Birth 6/1/88		Height 5'03"	
Weight 150		Eye Color BROWN		Hair Color black		Complexion medium	
Build medium		Scars, Marks, Tattoos, Unique Physical Features (Location, Date, Description) None		Marital Status Single		Religion CATHOLIC	
Local Address (Street, Apt. Number) 1406 Renaissance Way		(City) Boynton Beach, FL 33426		(State) FL		(Zip) 33426	
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)	
Business Address (Name, Street)		(City)		(State)		(Zip)	
DL Number, State G620813887010		Soc. Sec. Number		INS Number None		Place of Birth (City, State) Asuncion, Paraguay	
Citizenship USA		Co-Defendant Name (Last, First, Middle)		Race		Sex	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth	
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other:		Address (Street, Apt. Number)		(City)		(State)	
Notified by: (Name)		Date		Time		Juvenile Disposition 1. Handled/processed within Dept. and Released. 2. TOT HRS / OYS 3. Incarcerated	
Released To: (Name)		Relationship		Date		Time	
The above address provided by <input type="checkbox"/> defendant and / or <input type="checkbox"/> defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address. <input checked="" type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)		School Attended		Grade			
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property			
Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. Dispense/ Distribute	
M. Manufacture/ Produce/ Cultivate		Z. Other		Drug Type N. N/A A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin	
H. Hallucinogen M. Marijuana O. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetics		U. Unknown Z. Other			
Charge Description DUI		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 316.193(1) (a) (3)	
Drug Activity N		Drug Type N		Amount / Unit N/A		Offense # 21091481	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
Drug Activity		Drug Type		Amount / Unit		Offense #	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
Drug Activity		Drug Type		Amount / Unit		Offense #	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
Drug Activity		Drug Type		Amount / Unit		Offense #	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
Drug Activity		Drug Type		Amount / Unit		Offense #	
Location (Court, Courtroom, Address) Palm Beach County Courthouse 3228 Gun Club Rd		Court Date and Time Month September Day 2 Year 2021 Time 0830 AM		Date Signed 06/06/2021		Signature of Defendant (or Juvenile and Parent / Custodian)	
HOLD for other Agency Name: <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input checked="" type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Signature of Arresting Officer Cpl. J. Derby		Name Verification (Printed by Agent) 1 AM 9:17		Date Signed	
Inmate Deputy W. B. S.		I.D. # 16611		Pouch #		Witness here if subject signed with agency	

PBSO 5716 REV 2/97

DISTRIBUTION: WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - AGENCY

GOLD - DEPT. OF CORRECTIONS

AUG 2 2021

		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1 Juvenile N	
ADMIN	OBTS Number			Agency ORI Number		Agency Name		Agency Report Number	
	FLO 500000		PALM BEACH COUNTY SHERIFF'S OFFICE		06-		21-091481		
DEF	Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input checked="" type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes	
	Name (Last, First, Middle)		Alias		Race		Sex		Date of Birth
Gracia, Tatiana				H		F		6-1-88	
CHARGES	Charge Description	DUI		Charge Description					
	Charge Description			Charge Description					
VICTIM	Victim's Name (Last, First, Middle)		Race		Sex		Date of Birth		
	State of FL								
	Local Address (Street, Apt. Number)		(City)		(State)		(zip)		Phone
	Business Address (Name, Street)		(City)		(State)		(zip)		Phone
<p>The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.</p> <p><input checked="" type="checkbox"/> The Person taken into custody</p> <p><input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts. <input type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>1st</u> day of <u>August</u>, 20<u>21</u> at <u>5:28</u> <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p>									
Supplemental Probable Cause									
<p>I was in uniform in a marked PBSO vehicle on patrol when I responded to a dispatched call of a possible impaired driver being followed by a concerned citizen. Dispatch advised the vehicle, a white Hyundai Sonata bearing FL tag JMI-H04, was currently at the intersection of Melaleuca Lane and Davis Rd in unincorporated Lake Worth. Upon arrival at that location, I found the above described vehicle stopped in the right turn lane at a green traffic light. I stopped in the lane next to the Hyundai, turned on my overhead cruise lights, exited my vehicle, and made contact with a H/F who was occupying the driver's seat to ascertain if she needed assistance or there was a medical issue. The vehicle engine was running and the headlights were on. I asked the driver, who was subsequently identified as Tatiana Gracia DOB 6-1-88 via her FL DL, if she needed assistance. Gracia advised she had a flat tire and provided me with her DL. When Gracia spoke her words were slurred and she appeared confused as to where she was at. I also observed, via a sense of smell, an odor of alcoholic beverage, emanating from her person. Gracia's eyes appeared red & glassy. A visual inspection of the car revealed the right rear tire was flat. Based on the above visual observations I suspected Gracia might DUI. Deputy Derby ID 16611 arrived on scene and conducted a DUI investigation which led to Gracia being arrested.</p>									
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH <u>Sgt. Mendelsberg</u> (Signature of Arresting/Investigative Officer)								
	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>1st</u> day of <u>August</u> , 20 <u>21</u> by <u>Sgt. Mendelsberg 9157</u> (Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced <u>Badge</u>								
	Notary Public, Clerk of Court, Officer (F.S.S. 117.10) <u>16611</u>								
	PAGE 1 OF 1								

SUBJECT Garcia TatianaCASE NUMBER 21091481

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:☒ LT EYE-LACK OF SMOOTH PURSUIT☒ RT EYE-LACK OF SMOOTH PURSUIT☒ LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION☒ RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION☒ LT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES☒ RT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREESOther Observations:

I began by placing Garcia in the instructional stance to perform the Horizontal Gaze Nystagmus test. During this task in the left EYE I observed LACK OF SMOOTH PURSUIT. In the right EYE I observed LACK OF SMOOTH PURSUIT. I observed DISTINCT & SUSTAINED NYSTAGMUS AT Maximum DEVIATION in the left and right eye and at onset prior to 45 degrees in both eyes. Garcia did not remain in the instructional stance or follow instructions which were repeated multiple times.

WALK & TURN:

During the walk and turn, Garcia could not remain in the instructional stance, could not keep her balance, raised his arms for balance, and required instructions to be repeated several times. Garcia required clarification numerous times during explanation of instructions, she did not count aloud, started too soon, and took way too many steps to and from while not touching heel to toe. Garcia also performed a strange hop at the end of the walk and turn.

ONE LEG STAND:

During the one leg stand, Garcia did not follow the instructions or remain in the instructional stance. She did not lift her leg as instructed.

FINGER TO NOSE:

During the finger to nose task, Pearson touched the side of his finger to above the tip of his nose during every touch.

ROMBERG ALPHABET:

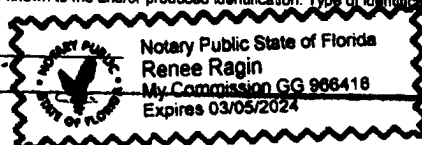
Pearson completed the romberg alphabet with no observable problems.

BREATH TEST RESULTS: 1) 2) 3) 4) STATE OF FLORIDA
COUNTY OF PALM BEACH**Cpl. J. Derby**

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to, affirmed and subscribed before me this 6th day of June, 2021 by Cpl. J. Derby(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Cpl. J. Derby #16611 known D/S

Notary Public, Clerk of Court, Officer (F.S. 117.10)

SCANNED
AUG 2 2021

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 1st DAY OF January 20 21 AT 0530 ☒ AM ☐ PM
SUBJECT: Garcia, Glacia Tatiana Mariel CASE NUMBER: 21091481
AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Cpl. J. Derby

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

A 9-1-1 caller reported a reckless driver in a White Hyundai Sonata bearing Florida tag JMIH04. Dispatch advised the Hyundai was all over the roadway and hitting curbs while traveling Westbound on 6th Ave (AKA Melaleuca Ln) from Interstate 95. Sgt. Mendelsberg observed the vehicle stopped at a green light in the right turn lane of Melaleuca Ln east of Davis Rd. The vehicle was on, the right rear tire was damaged and flat, and the engine was running. The driver was identified via Florida Driver's License as Tatiana Garcia. Upon my arrival, I observed Garcia behind the wheel of the still running vehicle, and asked her to turn the car off.

OBSERVATION OF DRIVER:

Garcia had slurred speech, watery bloodshot eyes, and the strong odor of an unknown alcoholic beverage emanating from her breath. Garcia was unsteady on her feet, and required support from the vehicle and deputies on scene at times in order to maintain her balance. Garcia spilled the contents of her purse and was clumsy.

DRIVER'S STATEMENTS:

Garcia made several statements to include: providing a zip code when being asked for an area code for her phone number, she was tired, deputies can come over for a barbecue, "I was drinking at my house" and then giving deputies a high five, and I called 911 and stopped my own self for someone to pick me up when I feel myself being a risk.

ODORS:

Garcia had the strong odor of an unknown alcoholic beverage coming from her breath.

GENERAL OBSERVATIONS

SPEECH: slurred

ATTITUDE: care-free, jovial, argumentative at times

CLOTHING: disheveled

MEDICAL/OTHER: asthma

STATE OF FLORIDA
COUNTY OF PALM BEACH

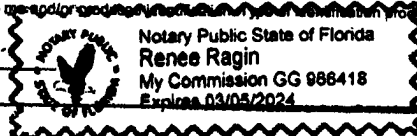
Cpl. J. Derby

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to, affirmed and subscribed before me this 6th day of June 20 21 by Cpl. J. Derby

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced the evidence necessary for my commission produced Cpl. J. Derby #16611 known D/S

Notary Public, Clerk of Court, Officer (F.S. 117.10)



SCANNED
AUG 2 2021

SUBJECT: Garcia, Tatiana 11 CASE NUMBER: 21-091481

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content.

OR

I am now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of chemical or controlled substances.

OR

I am now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content and the presence of chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am _____ of the _____.

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: (X) _____

Not Read on Camera

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X) _____

Not Read on Camera

SCANNED

SUBJECT: Garcia, Tatiana M. CASE NUMBER: 21-091481

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OF NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? _____

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? _____ ARE YOU UNDER THE INFLUENCE? _____

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? _____ WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? _____ WHAT'S WRONG? _____

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE:

EPILEPSY?	_____
GLASS EYE?	_____
FALSE TEETH?	_____
EAR INFECTION?	_____
INNER EAR TROUBLE?	_____
DIABETES?	_____

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? _____ WHERE? _____

INTERVIEWER: _____

SCANNED
AUG 2 2021

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH AND/OR URINE TEST

I, **Cpl. J. Derby**, a duly certified Law Enforcement Officer or Correctional Officer,
 (Name of Officer reading Implied Consent Warning)

am a member of **FLSO**, and I do swear
 (Name of law enforcement agency)

or affirm that on or about the _____ day of _____, 20____, at **0530** ☐ P.M. ☐ A.M.

DRIVER Tatiana **Maricel** **Garcia**
 (Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

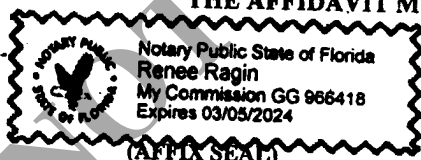
DL# **G620813887010**, state of _____, was placed under lawful arrest for
 the offense of **DUI** by **Cpl. J. Derby** and
 issued Citation # _____ (Name of Arresting Officer)

That on or about the _____ day of _____, 20____, at _____ ☐ P.M. ☐ A.M.
 in **PALM BEACH** County,

I requested that the driver submit to a **breath and/or urine** test to determine his or her blood alcohol level and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such test(s) would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended for refusing to submit to a breath, urine or blood test. I also informed the driver that he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended for refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he or she holds a CDL, or was operating a CMV, refusal will result in the disqualification of the Commercial Driver's License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she has previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver refused to submit to the test(s) requested.

 Signature of Law Enforcement Officer or
 Correctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)



The foregoing instrument was sworn and subscribed before

me this **01** day of **August**, 20**21**,

by **Cpl. J. Derby**,

who is personally known to me or who has produced

Cpl. J. Derby #16611 known D/S as identification

Notary Public _____

HSMV-BAR1001 (REV. 10/2016)

The foregoing instrument was sworn and subscribed before me:

 Signature of Attesting Officer

Title _____

Date _____

Note: Mail or hand deliver to the designated Bureau of Administrative Reviews office, Department of Highway Safety and Motor Vehicles, with the driver's license, the appropriate copy of the UTC, and the probable cause affidavit.

SCANNED

AUG 2 2021

TESTING FACILITY TASK REPORT

Garcia
SUBJECT: Garcia, Tatiana M. AGENCY: PBSO
DATE: Aug 1, 2021 CASE NUMBER: 21-091481
BEGINNING TIME: 07:45 VIDEO DVD NUMBER: N/A
ENDING TIME: 07:50

BREATH TESTS RESULTS: 1) Refusal TIME 07:49 A.M. ☒ P.M. ☐ 2) N/A TIME ----- A.M. ☐ P.M. ☐
3) N/A TIME ----- A.M. ☐ P.M. ☐ 4) N/A TIME ----- A.M. ☐ P.M. ☐

BREATH OPERATOR: R. Ragin #16877

MAINTENANCE TECHNICIAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred, Accent, Mumbled

ATTITUDE: Crying, moodswings, upset, repetitive

CLOTHING: Peach and green flower romper

MEDICAL CONDITIONS: Asthma

MEDICATIONS: Inhaler

OTHER:

Eyes are glassy & bloodshot
Odor of unknown alcoholic beverage on breath

REFUSED

COMMENTS:

Arrived at center A/O started 20 minute observation period at 07:21 hrs.

Subject refused to perform breath test.

A/O read I/C and explained I/C.

Subject stated she understood I/C.

Subject refused to take test.

Subject invoked the right to counsel.

No Rights read.

REFUSED

SCANNED
AUG 2 2021



PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE # 21091481

PBSO ZONE 1-32

AGENCY CASE # 216. 2297

CRASH CASE # _____

TIME OF STOP/CRASH 0530

DATE 68/01/2021

DAY _____

SUBJECT'S NAME Garcia
LAST

Tatiana
FIRST

Marie
MID

RACE W

SEX F

HGT 5'03"

WGT 150

DOB 6/1/88

LOCATION Davis Rd and Melaleuca Ln Lake Worth FL 33461

ARRESTING OFFICER'S NAME & ID Cpl. J. Derby

16611

AGENCY PBSO

DIVISION: Road Patrol

NOTIFIED BY COMMO Yes

ARRIVAL AT FACILITY 07:21

ARREST TIME 0630

BREATH RESULTS:

1)
2)
3)
4)

TESTING OFFICER'S ID 16877

PBSO VIDEOTAPE # N/A

SCANNED

AUG 2 2021



**PALM BEACH COUNTY
SHERIFF'S OFFICE**
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2021019035

Date: 8/2/2021

Specialist Name/ID: M.Meek/33849

SCANNED
AUG 2